

Response to Office Action

The table below presents the data as entered.

Input Field	Entered
SERIAL NUMBER	77361043
LAW OFFICE ASSIGNED	LAW OFFICE 113
MARK SECTION (no change)	
ARGUMENT(S)	
Please see the actual argument text attached within the Evidence section. Applicant notes that the Examining Attorney indicated in the May 25, 2011, Office Action that the refusal was a FINAL refusal. However, the TARR status identified the Office Action as a Non-final Action, and this response could only be filed electronically as a Response to Office Action, not as a Request for Reconsideration. In view of the Examining Attorney's clear statements that the Office Action was a final action, Applicant has submitted its argument in the form of a Request for Reconsideration.	
EVIDENCE SECTION	
EVIDENCE FILE NAME(S)	
ORIGINAL PDF FILE	evi_7420315735-170648257_.APOLLO_Response1.pdf
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ORIGINAL PDF FILE	evi_7420315735-170648257_.APOLLO_Response2.pdf
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DESCRIPTION OF	Argument and supporting evidence

EVIDENCE FILE	
SIGNATURE SECTION	
RESPONSE SIGNATURE	/Barbara Grahm/
SIGNATORY'S NAME	Barbara Grahm
SIGNATORY'S POSITION	Attorney of Record, Minnesota bar member
SIGNATORY'S PHONE NUMBER	612-607-7325
DATE SIGNED	11/23/2011
AUTHORIZED SIGNATORY	YES
FILING INFORMATION SECTION	
SUBMIT DATE	Wed Nov 23 17:22:49 EST 2011
TEAS STAMP	USPTO/ROA-74.203.157.35-2 0111123172249121811-77361 043-490952c6195ec7ca06025 74f445ee1e5942-N/A-N/A-20 111123170648257559

Response to Office Action To the Commissioner for Trademarks:

Application serial no. **77361043** has been amended as follows:

ARGUMENT(S)

In response to the substantive refusal(s), please note the following:

Please see the actual argument text attached within the Evidence section. Applicant notes that the Examining Attorney indicated in the May 25, 2011, Office Action that the refusal was a FINAL refusal. However, the TARR status identified the Office Action as a Non-final Action, and this response could only be filed electronically as a Response to Office Action, not as a Request for Reconsideration. In view of the Examining Attorney's clear statements that the Office Action was a final action, Applicant has submitted its argument in the form of a Request for Reconsideration.

EVIDENCE

Evidence in the nature of Argument and supporting evidence has been attached.

Original PDF file:

[evi_7420315735-170648257_.APOLLO_Response1.pdf](#)

Converted PDF file(s) (11 pages)

[Evidence-1](#)

[Evidence-2](#)

[Evidence-3](#)

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[Evidence-5](#)

[Evidence-6](#)

[Evidence-7](#)

[Evidence-8](#)

[Evidence-9](#)

[Evidence-10](#)

[Evidence-11](#)

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[Evidence-27](#)

SIGNATURE(S)

Response Signature

Signature: /Barbara Grahn/ Date: 11/23/2011

Signatory's Name: Barbara Grahn

Signatory's Position: Attorney of Record, Minnesota bar member

Signatory's Phone Number: 612-607-7325

The signatory has confirmed that he/she is an attorney who is a member in good standing of the bar of the highest court of a U.S. state, which includes the District of Columbia, Puerto Rico, and other federal territories and possessions; and he/she is currently the applicant's attorney or an associate thereof; and to the best of his/her knowledge, if prior to his/her appointment another U.S. attorney or a Canadian attorney/agent not currently associated with his/her company/firm previously represented the applicant in this matter: (1) the applicant has filed or is concurrently filing a signed revocation of or substitute power of attorney with the USPTO; (2) the USPTO has granted the request of the prior representative to withdraw; (3) the applicant has filed a power of attorney appointing him/her in this matter; or (4) the applicant's appointed U.S. attorney or Canadian attorney/agent has filed a power of attorney appointing him/her as an associate attorney in this matter.

Serial Number: 77361043

Internet Transmission Date: Wed Nov 23 17:22:49 EST 2011

TEAS Stamp: USPTO/ROA-74.203.157.35-2011112317224912

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REQUEST FOR RECONSIDERATION

Applicant hereby requests reconsideration of the final refusal, dated May 25, 2011, of application Serial No. 77361043 for the mark APOLLO.

REMARKS

The Examining Attorney refused registration of Applicant's mark under the Trademark Act Section 2(d), 15 U.S.C. § 1052(d), on the grounds that Applicant's mark, APOLLO, when used on or in connection with "delivery catheters for liquid embolics for use in treating neurovascular conditions," is likely to be confused with the marks in U.S. Registration Nos. 2,848,657 (APOLLO); 2,967,601 (APOLLO 3AC); and 2,971,504 (APOLLO AC), owned by ConMed Endoscopic Technologies, Inc., all for use in connection with "papillotomes and cannulae."

Applicant requests that the § 2(d) objection be withdrawn because the registered marks are not confusingly similar to Applicant's mark. Consumer confusion is unlikely because (I) the term APOLLO is widely used and registered in connection with medical devices, (II) the goods offered in connection with the marks are unrelated, and (III) the purchasers of medical devices are sophisticated, the channels of trade differ, and Applicant's goods are expensive.

I. THE TERM "APOLLO" IS WIDELY USED AND REGISTERED FOR OTHER MEDICAL PRODUCTS, INCLUDING SURGICAL DEVICES, WITH NO RESULTING CONSUMER CONFUSION

The term APOLLO, alone or in combination with other terms, is commonly used and registered for medical products, indicating that consumers are able to distinguish among the numerous APOLLO marks used and registered for a variety of medical goods and services. In fact, within the past year, two registrations were issued for marks that include the term APOLLO for use with gastrointestinal surgical devices. The goods in these registrations are much more closely related to those in the cited registrations than are Applicant's. Accordingly, registration of Applicant's mark is appropriate and unlikely to cause consumer confusion.

Consumer confusion is unlikely even where a subsequent user has incorporated the prior user's mark if "(1) the common portion is weak or descriptive; or (2) where the marks in their

entireties convey quite different meanings.” 3 *McCarthy on Trademarks and Unfair Competition* (4th Ed.) § 23.50 at 23-109 to 110 (hereafter, *McCarthy*). When a word is in frequent use in a particular field, consumer confusion is unlikely to result from use of the word by others in marks used for similar goods and services. See *General Mills, Inc. v. Kellogg Co.*, 824 F.2d 622, 3 U.S.P.Q.2d 1442 (8th Cir. 1987) (“mark’s components are so widely used that the public can easily distinguish slight differences in the marks, even if the goods are related.”); *Amstar Corp. v. Domino’s Pizza, Inc.*, 615 F.2d 252 (5th Cir. 1980), cert. denied, U.S., 101 S.Ct. 268, 66 L.Ed.2d 129 (1980) (multiple third-party registrations of the mark “Domino”); *Armstrong Cork Co. v. World Carpets, Inc.*, 597 F.2d 496 (5th Cir. 1979), cert. denied, 444 U.S. 932, 1100 S.Ct. 277, 62 L.Ed.2d 190 (1979) (multiple uses of the mark “World”); *American Heritage Life Ins. Co. v. Heritage Life Ins. Co.*, 494 F.2d 3, 11 (5th Cir. 1974) (multiple uses of the mark “Heritage”); *Holiday Inns, Inc. v. Holiday Out in America*, 481 F.2d 445 (5th Cir. 1973) (multiple uses of the mark “Holiday”); *Sure-Fit Prods. Co. v. Saltzson Drapery Company*, 254 F.2d 158, 117 USPQ 295, 297 (CCPA 1958) (“Where a party chooses a weak mark, his competitors may come closer to his mark than would be the case with a strong mark without violating his rights.”).

Here, the existence of multiple registrations of marks incorporating the word APOLLO for medical devices demonstrates that consumers have learned to differentiate among these marks without confusion. Most notably, Apollo Endosurgery, Inc. owns two recently-issued registrations for the mark APOLLO ENDOSURGERY (disclaiming “endosurgery”) for “[m]edical devices and surgical instruments for use in diagnosis and surgery of the gastrointestinal tract.” These goods are more closely related to the goods in the cited registrations (for gastroenterological surgical devices) than are Applicant’s neurovascular devices, yet these marks were accepted for registration and coexist on the Principal Register with the cited registrations.

It is notable that the Examining Attorney initially cited two other prior pending APOLLO applications against Applicant’s application. The first application was filed by Trans1 Inc. for the mark AXIALIF APOLLO for surgical medical devices and instruments. The second application was filed by Medtronic, Inc. for the mark APOLLO for surgical instruments, namely, an

anastomatic delivery device. Both applications were eventually published for opposition and allowed (and then subsequently abandoned for failure to file Statements of Use).

Details of live federal registrations consisting of or including the term APOLLO for use in connection with medical products follow:

Mark	Status	Owner	Goods/services
APOLLO ENDOSURGERY & Design ("endosurgery" disclaimed)	Registered August 2, 2011 4005525	Apollo Endosurgery, Inc.	Medical devices and surgical instruments for use in diagnosis and surgery of the gastrointestinal tract
APOLLO ENDOSURGERY ("endosurgery" disclaimed)	Registered February 15, 2011 3920115		
APOLLO	Registered 3183956 Dec. 12, 2006	LAP GmbH Laser Applikationen	Lasers, for medical purposes, namely for patient alignment, for radiotherapy and for nuclear medicine
APOLLO & Design	Registered 3266313 July 17, 2007	Apollo Physical Therapy Products, LLC	Apparatus for physical training for medical use
APOLLO BY MIDMARK (Stylized)	Registered 3146681 Sep. 19, 2006	Midmark Corporation	Dental water distillers, dental compressors, and dental vacuums
APOLLO	Registered 2555792 Apr. 2, 2002	Zimmer, Inc.	Implantable orthopedic prostheses, namely, knee prostheses
APOLLO 3	Registered October 21, 1997 2107505	ConMed Endoscopic Technologies, Inc.	Papillotomes
APOLLO AC	Registered July 19, 2005 2971504		Medical devices, namely, papillotomes and cannulae
APOLLO 3AC	Registered July 12, 2005 2967601		
APOLLO	Registered June 1, 2004 2848657		
APOLLO HEALTH	Registered 3000457 Sep. 27, 2005	Artemis Holdings LLC	Medical devices, namely portable light units for use in the fields of light therapy and light supplementation, for treating seasonal affective disorders, mood disorders, circadian cycle problems, jet lag problems, sleep disorders and jaundice

Mark	Status	Owner	Goods/services
APOLLO HEALTH THE BODY CLOCK EXPERTS	Pending Filed March 18, 2008 77425597	Apollo Light Systems, Inc.	Light therapy devices and apparatus, devices for simulating natural light variations in intensity during dawn and/or dusk
APOLLO	Registered 3080257 Apr. 11, 2006	Drager Medical AG & CO. KG	Anesthesia machines

As this list demonstrates, the term APOLLO is diluted in the medical device field and has been registered for a variety of medical devices in Class 10 by different owners. Applicant respectfully submits that its neurovascular goods are unrelated to Registrant's gastroenterological goods, and unquestionably less related – or no more closely related - to Registrant's goods than are those in other applications for marks comprising or containing the term APOLLO that have been allowed for registration since Applicant filed its application, particularly those owned by Apollo Endosurgery, Inc. Under the circumstances, Applicant is likewise entitled to registration of its mark.

In view of the above, Applicant believes that the 2(d) refusal should be withdrawn. The multiple registrations of marks including the term APOLLO for medical devices demonstrate that consumers have learned to differentiate among these marks without confusion, especially in light of the differences in the associated goods.

II. APPLICANT'S AND REGISTRANT'S GOODS DIFFER SIGNIFICANTLY

Confusion is unlikely because Applicant's and Registrant's goods are not related. In fact, they are completely unrelated except that they fall into the broad category of tubes used for medical purposes. Moreover, the Examining Attorney has not met the burden of proving that Applicant's specialized neurovascular micro-catheters and Registrant's gastroenterological papillotomes and cannulae are sufficiently related that confusion is likely to result.

In determining whether goods and services are closely related, "It is not enough that the products may be classified in the same category or that a term can be found that describes the product." See *Signature Brands, Inc. Substituted for Health O Meter, Inc. v. Dallas Technologies Corporation*, 1998 WL 80140 (TTAB 1998). See also, *Societe Civile Des Domaines, Dourthe*

Freres and Philippe Dourthe v. S.A. Consortium Vinicole De Bordeaux et De La Gironde, 6 U.S.P.Q.2d 1205 (TTAB 1988) (“the mere fact that a term may be found which encompasses the parties’ activities does not mean the consumers will view such activities as related in the sense that they will assume that they emanate from or are associated with a common source”) (citing *General Electric Co. v. Graham Magnetics, Inc.*, 197 U.S.P.Q. 690, 694 (TTAB 1977).

Even competition in the medical or health care field is insufficient to warrant an inference of likelihood of confusion as to the source of the products. *Astra Pharmaceutical Products, Inc. v. Beckman Instruments*, 718 F.2d 1201, 1206 (1st Cir. 1983) (fact that plaintiff and defendant both competed in medical field was insufficient in an infringement action to warrant inference of likelihood of confusion as to source). *See also, Welch Allyn, Inc. v. Tyco International Services AG*, 63 U.S.P.Q.2d 1508, 1513-14 (N.D.N.Y. 2002) (court found proximity of products in the marketplace weighed against a finding of likelihood of confusion between Plaintiff’s mark “Tycos” and Defendant’s mark “Tyco” given that Plaintiff did not present evidence that Defendant’s medical products fell within same general class or were sold through the same trade channels as Plaintiff’s medical and industrial diagnostic instruments and specialty lamps).

Here, although both Applicant’s and Registrant’s goods may be broadly categorized as “tubes,” that is where any similarity ends. Applicant’s neurovascular device is used to treat brain conditions, including aneurysms (weakened balloon-like portions of a vessel) and arterio-venous malformations (the abnormal growing together of arteries and veins). More specifically Applicant’s device is a micro-catheter (a very small diameter hollow tube) that is threaded into the body to the specific location in the brain where treatment is to take place. *See Exhibit A*. The micro-catheter is then used, for example, in injecting a liquid embolic into the affected area of the brain, which reduces the pressure and likelihood of rupture. *Id.*

In contrast, Registrant’s gastroenterological papillotomes and cannulae are used in procedures involving the bile ducts and the gallbladder to treat biliary conditions such as blockage, leakage, and infections of the bile duct. *See Exhibit B*. The papillotomes are curved cutting devices affixed to the ends of cannulae for use in cutting tissue near the pancreas and bile duct. *Id.*

There is a vast difference between Applicant’s specialized neurovascular micro-catheters for use in procedures involving the brain, and Registrant’s gastroenterological devices for use in

procedures involving the digestive system. Registrant's gastroenterological devices are never used in procedures involving Applicant's neurovascular devices, nor are Applicant's neurovascular devices used in procedures involving Registrant's gastroenterological devices. Gastroenterological procedures performed on the bile ducts, biliary tract, and the gallbladder are completely unrelated to neurovascular procedures performed on the brain, and such procedures are not performed in combination or by the same physicians.

Applicant also respectfully suggests that the Examining Attorney has not met the burden of showing that Applicant's neurovascular medical device and Registrant's gastroenterological instruments are sufficiently related that confusion is likely to result. *See 3 McCarthy* at § 19:128. The Examining Attorney's evidence that the goods are related includes definitions of "catheter" and "cannula," as well as some printouts from the Internet which show that companies exist that sell both "catheters" and "cannulae."

The Examining Attorney's determination that Applicant's and Registrant's goods are related simply because they are both defined as tubes that drain or administer fluid would erroneously dictate that any medical tubes used in surgery are necessarily related for likelihood of confusion purposes. As explained in Applicant's initial Response to Office Action, there are hundreds, if not thousands, of different types of medical tubes for draining or administering fluid. To argue that neurovascular catheters and gastroenterological papillotomes and cannulae are commercially related because they are both flexible tubes used for medical purposes is like arguing that soft drinks and cough syrup are related because they are both liquids that people swallow, or more to the point, that APOLLO for software for automated teller machines (Registration No. 3390684) is confusing with APOLLO for on-line travel reservation software (Registration No. 3555633) because they are both software. There are many, many different types of and uses for both catheters and cannulae, and these terms are widely used to describe devices with entirely different uses that are used and purchased by entirely separate groups of physicians. Physicians in nearly every area of practice, and certainly in every field of surgery, make use of catheters and cannulae. This does not mean that a surgeon is likely to believe that a catheter for use in a highly specialized neurovascular procedure is in any way related to papillotomes or cannulae used for gastroenterological procedures, or even cannulae for non-specialized purposes. There is nothing to suggest, and the Examining Attorney has provided no

evidence to show, that papillotomes or cannulae are used in procedures related to delivery of liquid embolics in the brain at all. Hence, Applicant respectfully suggests that the dictionary definition evidence cited by the Examining Attorney demonstrates only that delivery catheters and cannulae may both be broadly described as “tubes,” not that Applicant’s and Registrant’s goods are related.

The Examining Attorney also produced printouts from numerous websites retrieved from the internet to show that providers of surgical tools sell both catheters and cannulae. This evidence is insufficient to show that Applicant’s highly-specialized micro-catheters for use in brain surgery are sold through the same channels of trade as Registrant’s papillotomes and cannulae, or that the neurovascular specialists who purchase and use Applicant’s products would ever believe that those products emanate from the same source as Registrant’s products (or vice versa).

Specifically, several websites identified by the Examining Attorney show merely that companies exist which sell extremely wide varieties of products. For example, Accellent Inc. offers products ranging from heart valve leaflets to respiratory catheters to joint reconstruction tools to dental implants (website printout attached as Exhibit C). Another company identified by the Examining Attorney, AG Medipharm (located in India), states that it has “. . . a focus on *exporting of wide range of medical and hospital equipments and supplies*” (emphasis added) (website printout attached as Exhibit D). Yet another company identified by the Examining Attorney, Solmed Solutions Medical (located in Australia), states that it “provides online medical supplies and devices with a vast range to suit everyone . . . We can supply basic first aid dressings to household consumers, medical devices to paramedics . . . and requisites to nursing and aged care facilities” (website printout attached as Exhibit E). Its list of product offerings includes “pill reminders,” “surgical caps,” “tourniquets,” “gauze swabs,” and “incontinence catheters.” None of this evidence includes references to gastroenterological papillotomes/cannulae or neurovascular catheters.

It is well-settled that evidence such as this of companies offering broad arrays of goods has no probative value. *See 7-Eleven Inc. v. HEB Grocery Co. LP*, 83 USPQ 2D 1257, 1262 (TTAB 2007); *In re Tomberlin Prod. Group, LLC*, Ser. No. 78734308 (TTAB Nov. 30, 2007) (We do not give further consideration to those registrations submitted by the examining attorney

that . . . include a “laundry list” of goods.). In view of the breadth of goods offered on the websites provided as evidence by the Examining Attorney, and the fact that these websites are not evidence of the use of the respective marks on these goods, the evidence is not probative.

The Examining Attorney also supplied printouts from various other websites, which show that companies exist which sell both catheters and cannulae. It is notable that the companies are devoted to the treatment of conditions of specific parts of the body, and this evidence does not establish a relationship between neurovascular micro-catheters and gastroenterological papillotomes and cannulae. For example, Terumo offers cannulae and catheters *for cardiovascular surgery* (website printout attached as Exhibit F). Similarly, Sorin Group offers cannulae and catheters for *cardiopulmonary* use (website printout attached as Exhibit G). These printouts are not evidence that Applicant’s neurovascular and Registrant’s gastroenterological goods are related, nor that both are used in connection with the same conditions. *In re Grand Prix Import Inc.*, Ser. No. 77408025 (TTAB 2010). There is no mention of neurovascular delivery catheters in any of the evidence, and therefore nothing to show that neurovascular catheters and gastroenterological papillotomes and cannulae are available from a common source, or are otherwise related. Therefore, although the cited internet articles use the words “cannulae” and “catheters,” none of them demonstrates a sufficient relationship between a neurovascular catheter and a gastroenterological papillotome or cannula to establish a basis for likelihood of confusion. Again, there is nothing in the record to even suggest that cannulae are used in any of the same procedures, or by the same physicians, as are Applicant’s goods.

Given the very different functions performed by Applicant’s and Registrant’s medical devices, as well as the distinct medical fields in which the devices are used, there is virtually no possibility that the products could be confused, particularly when considered in light of the sophistication of the consumers for the products.

III. CONFUSION IS UNLIKELY BECAUSE THE PURCHASERS OF MEDICAL DEVICES ARE SOPHISTICATED, THE CHANNELS OF TRADE DIFFER, AND APPLICANT’S GOODS ARE EXPENSIVE

The purchasers of Applicant’s and Registrant’s products are sophisticated and so it is unlikely that the relevant purchasers would confuse the source of Applicant’s and Registrant’s

goods. An important factor in determining whether there is a likelihood of confusion is the sophistication of the reasonably prudent buyer of the products or services at issue. *See* 3 *McCarthy* § 23:91 at 23-180. Here, Applicant's device is sold directly to neurovascular specialists who specialize in the diagnosis and management of diseases and conditions affecting the brain. Likewise, Registrant's gastroenterological instruments are selected and used with the input of specialists highly trained in the treatment of conditions of the digestive system, including the bile duct and gallbladder. These sophisticated purchasers are not likely to confuse the source of the products or select them due to the mistaken assumption that their sources are related.

It has long been recognized that purchasers of medical devices such as those offered by Applicant are highly sophisticated. Such consumers are better able and more likely to distinguish between marks and goods than is the general consuming public and therefore consumer confusion is unlikely. In fact, according to one court, doctors are "as sophisticated a group as one could imagine." *See Pfizer Inc. v. Astra Pharmaceutical Prods., Inc.*, 858 F.Supp. 1305, 1328 (S.D.N.Y. 1994) (granting summary judgment for defendant in trademark infringement case, in part because consumers of pharmaceuticals were doctors, a sophisticated group of consumers); see also *In re N.A.D.*, 754 F.2d 996, 999-1000 (Fed. Cir. 1985) (reversing TTAB's refusal to register NARKOMED for "anesthesia machines for use in surgery" in the face of a registration of NARCO for "apparatus for administration of anesthesia," citing the fact that the NARKOMED machines would not be purchased without the input of an anesthesiologist or someone with equivalent technical knowledge as "a most important factor"); see generally 3 *McCarthy* § 23:96-101.

In *Astra Medical Instruments, Inc. v. Beckman Instruments*, 718 F.2d 1201 (1st Cir. 1983), the court found that the sophistication of the class of prospective purchasers (buyers of pharmaceuticals and medical equipment) was the "most critical factor that weighed against [the plaintiff]" in its trademark infringement claim. *Id.* at 1206. The court observed that it was "simply inconceivable that purchasers of the parties' products could be confused as to the source of these products." *Id.* at 1207. In *In re Digirad Corp.*, 45 USPQ2d 1841 (TTAB 1998), the Board determined that "x-ray imaging and nuclear imaging utilize distinctly different technologies and involve different medical specialties; that nuclear imaging equipment is highly

complex as well as quite expensive; that the purchasers of such equipment, doctors and directors of hospital diagnostic imaging departments, are very knowledgeable with respect to these goods; and that such purchases, which involve extensive discussions between seller and buyer, are taken with great care and consideration.” For these reasons, the Board reversed the Examining Attorney’s refusal to register DIGIRAD for nuclear imaging equipment based on the prior registration of DIGIRAY for x-ray imaging equipment “despite the fact that both ... are medical diagnostic technologies.”

Furthermore, medical devices are not purchased on impulse. In the case of Applicant’s products, the sales process involves highly-knowledgeable medical salespeople who make individualized sales presentations using detailed sales materials that identify Applicant as the source of the products. Such individualized marketing techniques for medical products do not allow for any confusion. *Astra Pharmaceutical Products, Inc. v. Beckman Instruments*, 718 F.2d 1201, 1206 (1st Cir. 1983). In fact, the court in *Astra* determined that salespeople in the medical industry make the source of individual medical products “crystal clear” through such personal sales presentations and detailed product catalogs.

The selection of a particular medical device is not entered into lightly by a physician. It is only after research and consultation that a neurovascular specialist selects and uses Applicant’s medical devices. In fact, the selection process takes place over weeks to months, and involves numerous face-to-face and telephone contacts with sales personnel. The sales process also involves training by Applicant’s sales personnel to promote safe and effective use of the device. This sophisticated face-to-face purchase process negates any possibility of confusion, as it indicates a high level of care in making the purchase decision.

In addition, these highly-trained sales personnel develop close relationships with the neurovascular specialists during the sales process for the device, and they maintain these relationships after the sale is complete. Applicant’s sales personnel are often present during procedures where the device is used so that the sales personnel can provide additional information about the device if required.

Moreover, the care with which Applicant’s customers make their decision is heightened by the fact that Applicant’s products are costly. In *In Re Spinergy Inc.* 1997 WL 699192 (TTAB 1997), the Board reversed a refusal to register REV-X for bicycle wheels despite the registration

of REV for “bicycle parts and accessories - namely, handlebar pads, frame bar pads, single stem pads, double stem pads and seat covers,” noting the carbon fiber bicycle wheels at issue cost \$300 to \$600 per wheel. *Id.* (“there is always less likelihood of confusion where goods are expensive”) *Electronic Design & Sales*, 21 USPQ2d at 1392 (Fed. Cir. 1992). The higher the price, the more careful the potential purchaser will be, which further reduces the likelihood of confusion. See *Weiss Assoc., Inc. v. HRL Assoc., Inc.*, 902 F.2d 1546, 1548 (Fed. Cir. 1990) (in making purchasing decisions regarding expensive goods, the reasonably prudent person standard is elevated to the standard of the “discriminating purchaser”). Applicant’s goods are expensive, sophisticated medical devices that are purchased only after careful consideration and a thoughtful purchasing decision.

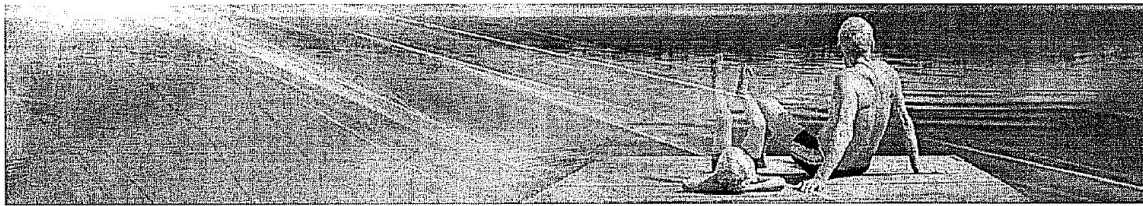
Since Applicant’s product is an expensive and specialized device targeted to a highly discriminating group of purchasers, and sold only through trained sales people who develop a close working relationship with the neurovascular specialist purchaser, there is virtually no likelihood that a sophisticated neurovascular specialist who purchases and uses Applicant’s device to repair conditions of the brain would believe that Registrant’s medical products, used to treat conditions of the digestive system, originated from the same source as Applicant’s goods.

Confusion between Applicant’s and Registrant’s marks is unlikely because the term APOLLO is a commonly used and registered mark for medical devices, the goods used in connection with the marks are completely unrelated, purchasers of medical devices are highly sophisticated, the channels of trade differ, and Applicant’s device is expensive and purchased only after a careful and thoughtful evaluation of the product.

CONCLUSION

All issues raised by the Examining Attorney having been addressed, Applicant respectfully requests that the Examining Attorney withdraw the § 2(d) objection and approve the application for publication.

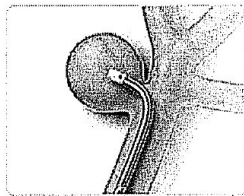
EXHIBIT A



Micro Catheters

Micro catheters are small hollow tubes that are typically inserted into a patient through a small incision in the groin. Neurovascular micro catheters are threaded through the vessels in the body to a specific location in the brain where treatment is to take place.

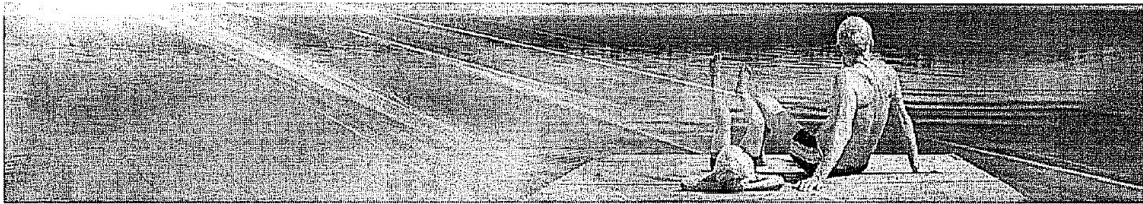
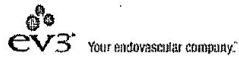
- Echelon™ Micro Catheter
- Marathon™ Flow Directed Micro Catheters
- Nautica™ 14 XL Micro Catheter
- Rebar® Reinforced Micro Catheter
- UltraFlow™ Flow Directed Micro Catheters



Indications, contraindications, warnings and instructions for use can be found in the product labeling supplied with each device.

CAUTION: Federal (USA) law restricts this device to sale by or on the order of a physician.

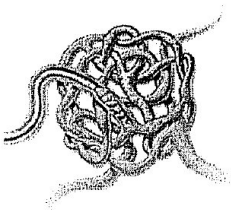
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Liquid Embolics

Liquid embolic products are used to treat both aneurysms (weakened balloon-like portions of a vessel) and arterio-venous malformations (the abnormal growing together for arteries and veins forming a web-like mass). The embolic material is injected in a liquid form through a small micro-catheter into the effected area of the brain, where it begins to solidify, reducing the pressure and likelihood of rupture. Unlike other liquid embolics on the market, ev3's Onyx® Material is non-adhesive and provides a more controlled delivery and set up.

- Onyx® LES
- Onyx® HD-500



Indications, contraindications, warnings and instructions for use can be found in the product labelling supplied with each device.

CAUTION: Federal (USA) law restricts this device to sale by or on the order of a physician.

Resources

- Onyx LES (PDF)
- Onyx HD-500 (PDF)

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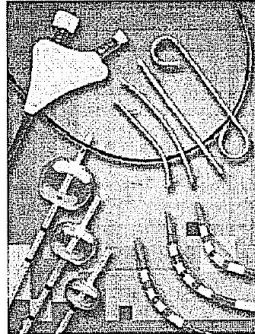
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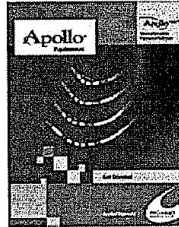
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ConMed Endoscopic Technologies offers a full selection of papillotomes to meet your ERCP needs. ConMed's line includes papillotomes in various tip lengths, tip types, tip diameters and cutting wire lengths for a customized fit to the physician, procedure and patient. All Apollo Papillotomes meet appropriate IEC electrical safety standards.

GUARANTEED ORIENTATION

- The Apollo papillotomes are the only papillotomes which are guaranteed to orient between 11 and 1 o'clock

SELECTION

- Full range of sizes and tip configurations to meet your ERCP needs

VISIBILITY

- Radiopaque Distal Tip enables fluoroscopic visualization of tip location.
- Color Coded Cutting Wire Markers

APOLLO 3 AC® ADVANCED CANNULATION TRIPLE LUMEN PAPILLOTOMES

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APOLLO 3® BEVELED TIP TRIPLE LUMEN PAPILLOTOMES

APOLLO AC® ADVANCED CANNULATION DOUBLE LUMEN PAPILLOTOMES

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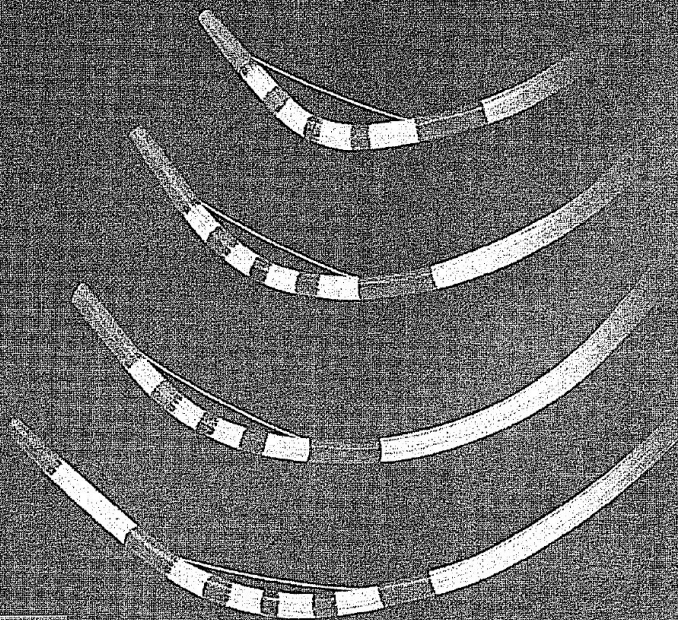
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Papillotomes

Advanced Cannulation Triple Lumen

Apollo³ AC
Papillotome

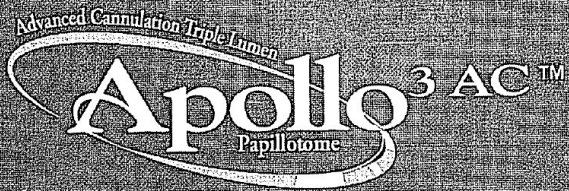
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Triple Lumen Papillotome



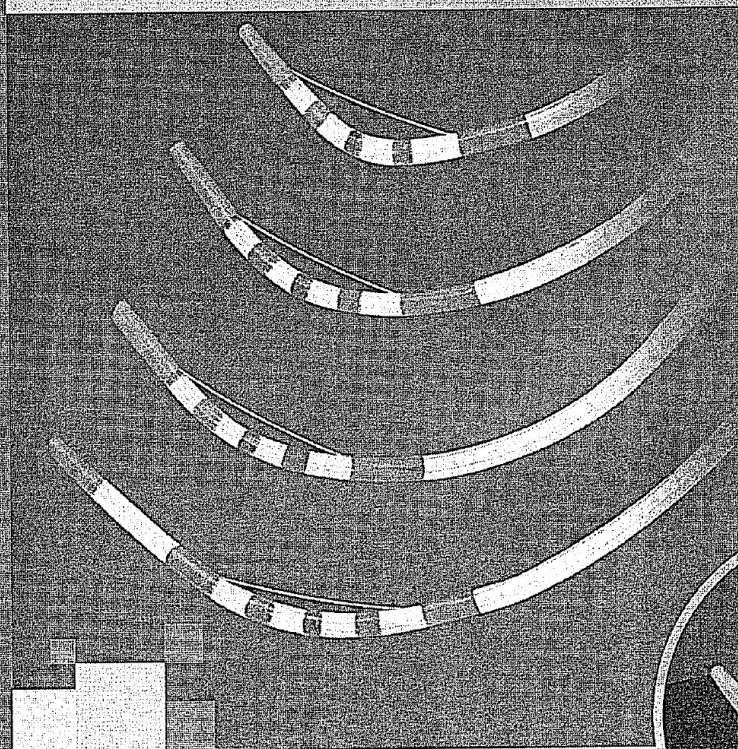
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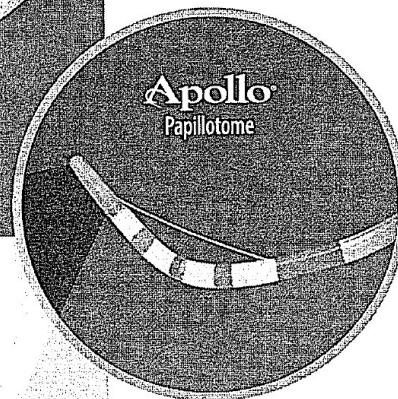


Advanced Cannulation • Triple Lumen Papillotome



4.5F Tip provides .035" compatible triple lumen papillotome.

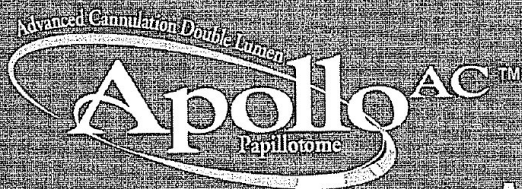
- Smooth taper reduces trauma to the papilla
- 4.5F tip designed to improve cannulation performance



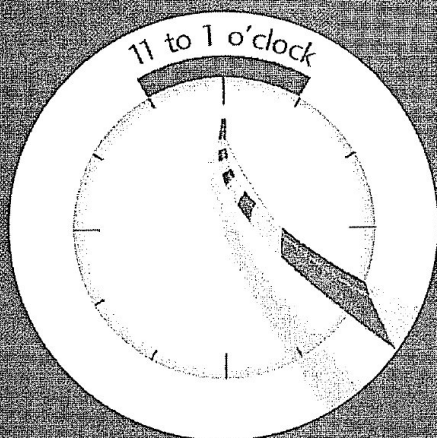
Papillotome Tip



- CONMED®
- Existing Technologies



Advanced Cannulation Double Lumen Papillotome

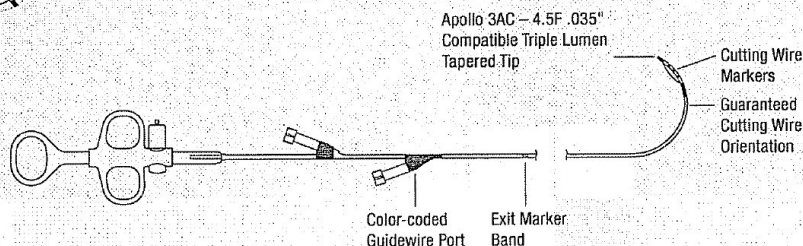


Guaranteed Orientation

The Apollo® papillotomes are guaranteed to orient between 11 and 1 o'clock.

Other Advantages

- **Radiopaque distal tip** enables fluoroscopic visualization of tip location.
- **Color coded cutting wire markers** provide endoscopic visibility for determining papillotome depth and cutting wire location.
- **Exit marker on the shaft of the papillotome** provides a visual cue to the clinician as to when the papillotome is exiting the scope.
- **Color coded guidewire port.** Visual indicator eliminates confusion in a dark procedure room.
- **Full range of tip shapes** accommodate a variety of procedure needs.



Ordering Information

Tapered Tip Apollo® Triple Lumen Papillotomes

Catalog Number	Tip Type	Tip Length	Tip OD	Cutting Wire Length	Cutting Wire Type	Catheter Length	Catheter OD	Guidewire Compatibility
007104	Short Nose	8 mm	5F	20 mm	Monofilament	190 cm	7-5F	.035\"/89 mm
007105	Short Nose	8 mm	5F	30 mm	Monofilament	190 cm	7-5F	.035\"/89 mm
7104AC	Short Nose	5 mm	4.5F	20 mm	Monofilament	190 cm	7-4.5F	.035\"/89 mm
7105AC	Short Nose	5 mm	4.5F	30 mm	Monofilament	190 cm	7-4.5F	.035\"/89 mm
007106	Long Nose	20 mm	5F	20 mm	Monofilament	190 cm	7-5F	.035\"/89 mm
007107	Long Nose	20 mm	5F	30 mm	Monofilament	190 cm	7-5F	.035\"/89 mm

Tapered Tip Apollo® Double Lumen Papillotomes

Catalog Number	Tip Type	Tip Length	Tip OD	Cutting Wire Length	Cutting Wire Type	Catheter Length	Catheter OD	Guidewire Compatibility
007100	Short Nose	8 mm	5F	20 mm	Monofilament	190 cm	7-5F	.035\"/89 mm
007101	Short Nose	8 mm	5F	30 mm	Monofilament	190 cm	7-5F	.035\"/89 mm
7100AC	Short Nose	5 mm	4.5F	20 mm	Monofilament	190 cm	7-4.5F	.035\"/89 mm
7101AC	Short Nose	5 mm	4.5F	30 mm	Monofilament	190 cm	7-4.5F	.035\"/89 mm
007102	Long Nose	20 mm	5F	20 mm	Monofilament	190 cm	7-5F	.035\"/89 mm
007103	Long Nose	20 mm	5F	30 mm	Monofilament	190 cm	7-5F	.035\"/89 mm

Beveled Tip Apollo® Triple Lumen Papillotomes

Catalog Number	Tip Type	Tip Length	Tip OD	Cutting Wire Length	Cutting Wire Type	Catheter Length	Catheter OD	Guidewire Compatibility
050071	Short Nose	8 mm	5.5F	20 mm	Monofilament	190 cm	7-5.5F	.035\"/89 mm
050073	Short Nose	8 mm	5.5F	30 mm	Monofilament	190 cm	7-5.5F	.035\"/89 mm

Beveled Tip Apollo® Double Lumen Papillotomes

Catalog Number	Tip Type	Tip Length	Tip OD	Cutting Wire Length	Cutting Wire Type	Catheter Length	Catheter OD	Guidewire Compatibility
050063	Short Nose	8 mm	5.5F	20mm	Monofilament	190cm	7-5.5	.035\"/89 mm
050064	Short Nose	8 mm	5.5F	30mm	Monofilament	190cm	7-5.5	.035\"/89 mm
050053	Short Nose	8 mm	5.5F	20mm	Braided	190cm	7-5.5	.035\"/89 mm
050054	Short Nose	8 mm	5.5F	30mm	Braided	190cm	7-5.5	.035\"/89 mm

All Apollo papillotomes accommodate an Olympus® active cord and are packaged 1/box.

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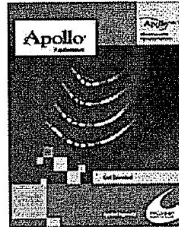
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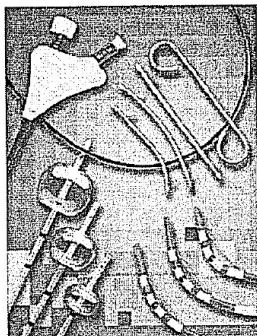
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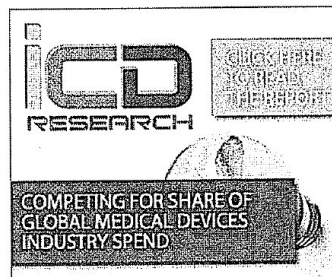
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- Biopsy Forceps
- Balloon Expandable Stents and Delivery Systems
- Balloon Dilation Catheters
- Ultrasound Catheters
- PTCA Guidewires
- Guide Catheters
- Closure Devices
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- Implantable Cardioverter Defibrillators (ICDs)
- Cardiac Resynchronization Therapy Devices (CRT-Ds)
- Pacing, ICD and CRT-D Leads
- Leads
- Lead Delivery Systems
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- Tunneling Tool
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- Beating Heart Surgery Systems
- Heart valve leaflets
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- Anastomosis Devices
- Peripheral Vascular:
- Distal Projection Devices
- Self Expanding Stents and Delivery Systems
- Balloon Expandable Stents and Delivery Systems
- Embolic Protection Devices
- AAA Stent Grafts
- TAA Stent Grafts
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- Peripheral Guiding Catheters
- Ultrasound Catheters
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- PFO Closure Devices
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- Trocars
- Infertility Devices
- Bipolar Devices
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- Thermal Tumor Ablation
- Incontinence Devices
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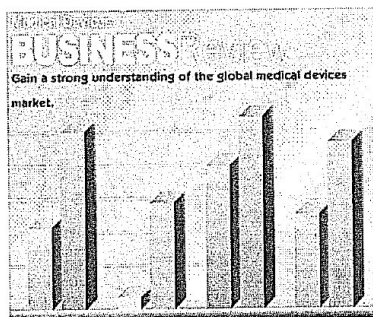
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 - Drill Guides
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 - Tamps, Drills, Burrs
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 - Miscellaneous Synthetic Bone Implants
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- High Potential Testing
- Lubricity Testing
- Nitinol Bend and Free Recovery Testing
- Nitinol DSC Testing
- Pressure Testing
- SEM Analysis
- Tensile Testing
- Thermal Analysis
- Coating Durability Testing

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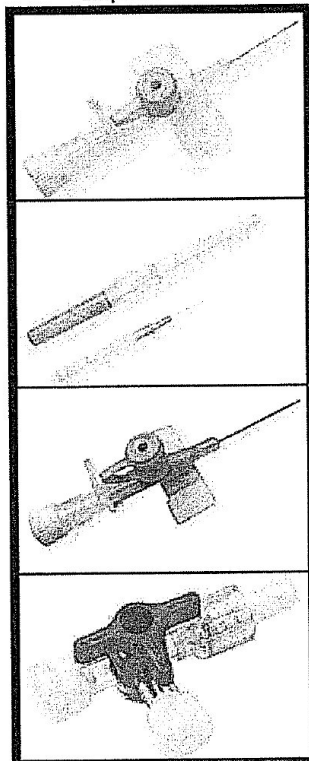
AG MEDIPHARM

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AN ISO 13485:2003 CERTIFIED COMPANY



About Us

AG MEDIPHARM PVT. LTD. was founded in the year 2007 by a small group of professionals with a focus on exporting of wide range of medical and hospital equipments and supplies.

AIM

The company aims to serve its customers as a **ONE STOP SUPPLIER** catering to their requirements of different products with the best of quality at the competitive pricings, using its expertise of sourcing from best available sources. Because we strongly believe that customer relationships are at the heart of every successful company, we decided that the best use of our resources were to serve our customers in a way that no one else in the industry had approached. For that reason, we set our sights and energies on becoming a distinguished supplier of healthcare products.

VISION

To be recognized as a company of **DEDICATION, HONESTY, INTEGRITY, AND SERVICE.**

MISSION

1. To contribute to human welfare by delivering to healthcare providers the products that alleviate pain, restore health, and extend life.
2. To strive for the distribution of the greatest possible reliability and quality in our products; to be the unsurpassed standard of comparison in terms of service and to be recognized as a company of dedication, honesty, integrity and service.
- 3 To make a fair profit on current operations to meet our obligations, sustain our growth, and reach our goals.

QUALITY POLICY

QUALITY for us holds the top priority and thus we ensure the highest standards maintenance in terms of procuring as well as supplying the medical products. Our association with WHO GMP / ISO Certified vendors as well as stringent quality tests at each stage help us to ensure in products the optimum quality standards which includes, proper checking of finished goods before packaging, damage-free packaging, cautious dispatch process, prompt after sale services to the customers and feedback collection – all these activities enables us to supply all the **Medical Devices** and **Disposable Items** as per International standards.

QUALITY ASSURANCE

In the pursuit of quality, AG Medipharma has successfully implemented Quality Management System and maintaining **ISO 9001:2000, ISO 13485:2003, CE Marking** as per European Medical Device Directive 93/42/EEC of 14 June 1993 and **WHO GMP Certification** requirements.



November
17-20 2010
Germany



Arab Health 2011 Dubai
24-27 January 2011

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Solmed provides **Online Medical Supplies and Devices** with a vast range to suit everyone. We source and supply to the Health Industry and the Individual Consumer. We continually expand our range to support the expectations of our customers.

SOLMED ONLINE MEDICAL SUPPLIES

Our customer base is very diverse and they select products based on their needs. We can supply basic First Aid Dressings to Household consumers, Medical Devices to Paramedics, Intravenous items to Medical Centres, Combination products to GPs, Solutions to Vets, Health Supplies to Trekking Groups, items to remote Health Regions, and requisites to Nursing and Aged Care facilities.

<http://www.solmed.com.au/>

11/4/2011

Our Solmed philosophy of **SOURCE - SUPPLY - PROTECT** is an ongoing commitment to our customers.

Please take the time and look through this site and gain the confidence in us. We want to earn your trust!

SOLUTIONS MEDICAL ONLINE FOR EVERYONE

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NETBAN



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HIGH PERFORMANCE
SURGICAL MEDICAL MASK**
(Bx 50)
69-01



**HEADWARE FACE MASK
P2 N95 HIGH
PERFORMANCE
RESPIRATOR X BOX 20**
376-01



**HEADWARE SURGICAL
SCARVES (x 25) GREEN**



**HEADWARE SURGICAL
BOUFFANT CAPS (x 50)**



**HEADWARE SURGICAL
BOUFFANT CAPS (x 50)**

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Cock**

**BURNAID FIRST
AID BURN GEL
SACHET 3.5g x 5**

**INCONTINENCE
CATHETER
PROCEDURE
PACK STERILE**

**Cannula 14G x
50mm IV SUREFLO
TERUMO**

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ADULT OR CHILD
WITH 210CM
TUBING**

**ABDOMINAL
SPONGE 22.5 X
22.5cm FIRST AID
PACK 5**

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MULTI-PURPOSE
MEDICAL
INSTRUMENT
PACK STERILE
CTN of 10**

**SHARPS
CONTAINER 1.4L
SCREW TOP WITH
INSERT**

**GLOVES NITRILE
PARAMEDIC
POWDER FREE
TEXTURED LONG
CUFF LARGE (Box
100) NTR36LL**

**BURNAID FIRST
AID BURN
DRESSING 10CM x
10CM**

SF002

GREEN
RC002

WHITE
RC004



HEADWARE SURGICAL
BOUFFANT CAPS (x 50)
BLUE
RC001



HEADWARE PROTECTIVE
CRIMPED CAPS (PACK OF
100)
105-01W

EXHIBIT F

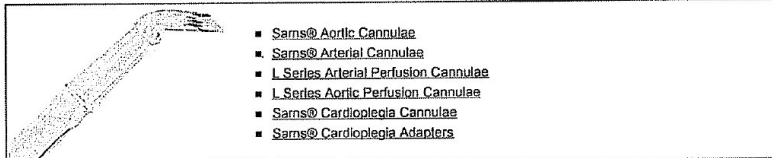


Cannulae and Catheters Products

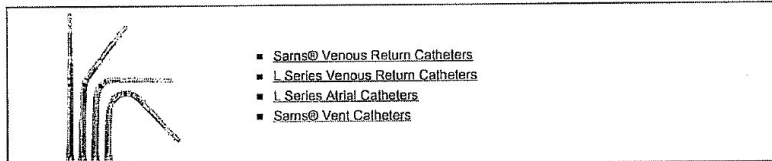
Terumo® and Sarns® brand cannulae and catheters have been valued by generations of surgeons who rely on experience and the right tools for successful cardiac surgery. Other manufacturers have attempted to imitate the unique designs and benefits of such products as the Sarns® High-flow and D4 products, and, most recently, the Soft-flow aortic cannula, the first low velocity arterial cannula. Terumo also produces the industry's first shape-retaining catheter, the Sarns® Malleable Venous Return Catheter, used by surgeons in less invasive procedures requiring small incisions.

For pediatric cannulae [click here](#).

Cannulae



Catheters



Suckers

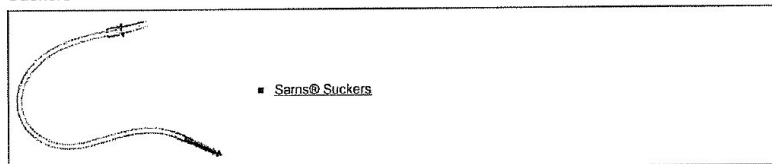
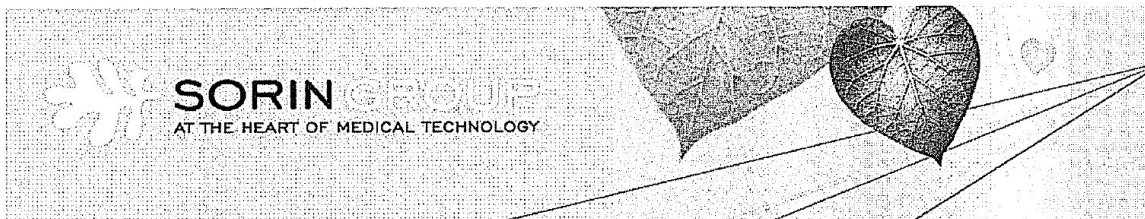



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CARDIAC RHYTHM MANAGEMENT

HEART VALVES

Cannulae and Catheters

Sorin Cardiopulmonary cannulae and catheters feature simple designs and quality construction. They are assembled using special ultraviolet adhesives and employ stringent quality control measures.

Intelligent design and thoughtful touches are a hallmark of these devices. For example, the large, knurled luer connectors are easy to use with wet, gloved hands. Needles use international color codes for accurate identification of size, and centimeter depth markers aid accurate insertion. Additionally, they are available in many configurations and sizes to ensure maximum flexibility for every procedure.

Minimally Invasive Cannulae

The portfolio of cannulation solutions provides optimal blood flow with the smallest size possible. The advanced designs allow easy insertion for minimally invasive procedures.

[View our brochure](#) for more information.

Venous Return Cannulae

Designed with an open bullet tip to help ensure continuous flow, the Venous Return Cannulae is available with your choice of rigid or flexible tips. Kink resistant tubing for non-reinforced cannulae is available as a cost-effective alternative to wire wound tubing. Available in single stage and dual stage options.

[View our data sheet](#) for more information.

Aortic Arch Cannulae

The ultra-thin, rigid cannulae tips permit high flow and low pressure drop, while the tapered tubing and tip transition designs help reduce turbulence. Available as a straight connector with red vented end cap, straight luer connector with red vented end cap or porous vent plug in most styles. Both curved tip and straight tip cannulae are available in a wire reinforced option, or with a special kink-resistant non-reinforced tubing for a cost-effective alternative. Flexible curved tip aortic arch cannulae are available with non-reinforced, kink-resistant tubing in a 16 inch length to allow connection outside the surgical field.

[View our data sheet](#) for more information.

Aortic Root Cardioplegia Cannulae

Tapered tips are molded as a single piece for consistent high quality and to provide a tight seal to the insertion site. Each cannula includes side holes for air venting. Non-vented cannulae include a movable suture ring; vented cannulae include a butterfly suture flange with suture holes.

[View our data sheet](#) for more information.

Venting Catheters

Wire in the wall of our Malleable Vent Catheter allows it to retain any shape for easy positioning. The soft open tip is less traumatic to the patient and maintains flow. 8 side holes ensure high unobstructed flow. A special inner lumen profile allows the catheter to be clamped.

The Atrial Vent Catheter includes 32 side holes plus a less traumatic open tip to ensure high drainage and decompression of the left heart. The removable, malleable stylette with a two-position latch provides options and control of final positioning.

The Left Ventricular Vent Catheter includes 16 side holes, and the less traumatic open tip to ensure high drainage and decompression of the left ventricle. It also includes a two-position latch and is available in two sizes and lengths.

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